

Texas Department of Criminal Justice

STEP 2

OFFENDER

Grievance #: **UGI Recd Date:**

***	STEP 2	OFFENDER GRIEVANCE FORM	HQ Recd Date: Ochsner, Clerk of Cour
Offender Name:	And the second s	TDCJ#	Grievance Code:
Unit:	Housing As	Investigator ID#:	
Unit where inciden		Extension Date:	
<u>400</u>	r-Houch: Kr	ett P. Eclison	

You must attach the completed Step 1 Grievance that has been signed by the Warden for your Step 2 appeal to be accepted. You may not appeal to Step 2 with a Step 1 that has been returned unprocessed.

Give reason for appeal (Be Specific). I am dissatisfied with the response at Step 1 because... Several 11-27-19 I Had my total Neck Pased They was in a Bus wreck 2.26-20, that weeks after Back Suspery. I Home Suffered wrock, the MRC of Back ok. Severe Navrowing, and Numbress + uperkness that would last 1 ON SEVERAL OCCASIONS ac 21 whose who told me to wat our Usp tal Calveston one Hospital Calveston who told me of Severe Norrowing need Rock + Scrows or Plades + Bolts e Reportedly Asked to talk to A.Cha my Situations I Have not Seen A. Chan N.P. O- Borber on 2-10-21, who Refused Crowde Care Kisit HOTE, Cause the Cells are Nice. Had Stank not been given a introversus Antibiotic ON 2-17-21 I woke up and Almost Fell when I to my whist KS Hord to Function YOUR SIGNATURE IS REQUIRED <u>I-Januals Af ALC.</u> I-128 Front (Revised 11-2010) (OVER)

into F-wins, So I told Him my Problem. He S	Edond Noone's Called
Medical and left. Then I Had a Bronking office	cer Camp in and Gulad
medical, He told me They were Coming. They went	
if you Don't Believe me write Cary Butand who	Sign Set me des alle-
	ges seat over the e arts
Offender Signature:	Date:
He testified at the Corona Virus Hearing, Sir	all the Mr Pack Here
con tracked Severally terrible at Around 2	:50 Pm a Office-Dreaky Co
C 1. 5 met he hadical I Seak a N	urse Sherleve Caste who
11 1 1 1 1 1 1 1 1 m week one	+ Numbress, The madelle
all states of medical yes is	7 27 75 65 65 65
- all throught it's remains	en. I
How Lott me ill know its as you, and ruck y	on go, it is seen a
Ach La madeal Hok Gary Butants of any ofte	1. der 72 + 15 4335 NGC 16
Characie store Annuay Mrs Cooke Cod Hard	e another stand acres than
Has Come up on my Chir, This makes The 6th of Here Mrs Cole also staded that I was Abusing my Signature Authority:	the ive 15th Steph Interior
How Mis Cake also stated that I was Abusing my	Benody (; + was Preseribed
Signature Authority:	Date:
Returned because: *Resubmit this form when corrections are made.	OFFICE USE ONLY
	Initial Submission CGO Initials:
☐ 1. Grievable time period has expired.	Date UGI Recd:
☐ 2. Illegible/Incomprehensible.*	Date CGO Recd:
☐ 3. Originals not submitted. *	(check one)ScreenedImproperly Submitted
4. Inappropriate/Excessive attachments.*	Comments:
5. Malicious use of vulgar, indecent, or physically threatening language.	Date Returned to Offender: 2 nd Submission CGO Initials:
	Date UGI Recd:
☐ 6. Inappropriate.*	Date CGO Recd:
	(check one)ScreenedImproperly Submitted
	Comments:
CGO Staff Signature:	Date Returned to Offender:
	3 rd Submission CGO Initials:
•	
· · · · · · · · · · · · · · · · · · ·	Date UGI Recd:
	Date UGI Recd: Date CGO Recd:
	Date UGI Recd:

Date Returned to Offender:

OFFICE USE ONLY

Grievance #:

UGI Recd Date:

HQ Recd Date:

Date Due:



Texas Department of Criminal Justice

STEP 2

OFFENDER GRIEVANCE FORM

Offender Name:		.TDCJ#	Grievance Code:
Unit:	Housing Assignment:		Investigator ID#:
Unit where incident occu			Extension Date:
	e completed Step 1 Grievance th not appeal to Step 2 with a Step 1		Warden for your Step 2 appeal to be cessed.
OU 1-21-21 by		Caste Sad it was	is given to me 2.13.21.
			ed. Sir my Bewody (was
given to me 1	1-25-21, and there	are Several with	esses to this, mrs Cagle
Sad I Was a	2 "Constant medical	Complant or Pa	ablem. The Also Said
Ske was somes	to toll Dr A.Cha	to Stop my B	Beaudy That I was
			s told to go back to
			am in a Constart
State of Pan	+ Fear, and down	t know who to	turne to.
	Plaase Help	ail.	
	· · ·		
See writi	2254 Filed	2-8-21 6	Ne
	I NEEC 1	Help, we A	11 do
	Mar	Wy + GOD	WS(e5)
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Offender Signature:	Date:	
Grievance Response:	The transfer of the state of th	
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and the state of t		A
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and the second of the second o		
	-	
		A - 35
Signature Authority:	Date:	
Returned because: *Resubmit this form when corrections are made.	OFFICE III	TO ONIT V
	OFFICE US	CGO Initials:
☐ 1. Grievable time period has expired.		
☐ 2. Illegible/Incomprehensible.*	Date UGI Recd: Date CGO Recd:	
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☐ 4. Inappropriate/Excessive attachments.*	Comments:	
	Date Returned to Offender:	· · · · · · · · · · · · · · · · · · ·
☐ 5. Malicious use of vulgar, indecent, or physically threatening language.	•	
6. Inappropriate.*	Date UGI Recd:	
	Date CGO Recd:	
	(check one)Screened	
CCO Stoff Signatures	Comments: Date Returned to Offender:	
CGO Staff Signature:	3 rd Submission	
	Date UGI Recd:	
•	Date CGO Recd:	
·	(check one)Screened	•
	Comments:	
	Date Returned to Offender:	

